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SERIAL NUMBER 10/601,458	FILING OR 371(c) DATE 06/23/2003 RULE	CLASS 417	GROUP ART UNIT 3746	ATTORNEY DOCKET NO. P5954CIP
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/054,784 10/29/2001 PAT 6,581,390 *Vikansha.*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

08/29/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Mkare</i> <i>VSD</i> Examiner's Signature Initials				

ADDRESS

28465

TITLE

Cryogenic fluid delivery system

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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